

AMENDMENT

STATEMENT OF ECONOMIC INTERESTS

Date Received
Official Use Only

COVER PAGE

A Public Document

MAY 11 PM 1:55

Please type or print in ink.

NAME (LAST)	(FIRST)	(MIDDLE)	DAYTIME TELEPHONE NUMBER	
Becerra	Lucia	Christina	(916) 263-0782	
MAILING ADDRESS (Business Address Acceptable)	STREET	CITY	STATE	ZIP CODE
2000 Evergreen Street, Suite 100	Sacramento	CA	95815	OPTIONAL: E-MAIL ADDRESS
				lbecerra@dbw.ca.gov

1. Office, Agency, or Court

Name of Office, Agency, or Court:

Department of Boating and Waterways

Division, Board, District, if applicable:

Your Position:

Acting Director

► If filing for multiple positions, list additional agency(ies)/
position(s): (Attach a separate sheet if necessary.)

Agency: _____

Position: _____

2. Jurisdiction of Office (Check at least one box)

☒ State☐ County of _____☐ City of _____☐ Multi-County _____☐ Other _____

3. Type of Statement (Check at least one box)

☒ Assuming Office/Initial Date: 04 / 16 / 10☐ Annual: The period covered is January 1, 2009,
through December 31, 2009.

-or-

☐ The period covered is ____/____/____, through
December 31, 2009.☐ Leaving Office Date Left: ____/____/____
(Check one)☐ The period covered is January 1, 2009, through the
date of leaving office.

-or-

☐ The period covered is ____/____/____, through
the date of leaving office.☐ Candidate Election Year: _____

4. Schedule Summary

► Total number of pages
including this cover page: 2► Check applicable schedules or "No reportable
interests."I have disclosed interests on one or more of the
attached schedules:Schedule A-1 ☐ Yes – schedule attached
Investments (Less than 10% Ownership)Schedule A-2 ☒ Yes – schedule attached
Investments (10% or Greater Ownership)Schedule B ☐ Yes – schedule attached
Real PropertySchedule C ☐ Yes – schedule attached
Income, Loans, & Business Positions (Income Other than Gifts
and Travel Payments)Schedule D ☐ Yes – schedule attached
Income – GiftsSchedule E ☐ Yes – schedule attached
Income – Travel Payments

-or-

☐ No reportable interests on any schedule

5. Verification

I have used all reasonable diligence in preparing this
statement. I have reviewed this statement and to the best of
my knowledge the information contained herein and in any
attached schedules is true and complete.I certify under penalty of perjury under the laws of the State
of California that the foregoing is true and correct.Date Signed 5/10/10
(month, day, year)Signature _____
(File this originally signed statement with your filing official.)

SCHEDULE A-2
Investments, Income, and Assets
of Business Entities/Trusts
(Ownership Interest is 10% or Greater)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
AMENDMENT

► 1. BUSINESS ENTITY OR TRUST

The Becerra Group

Name
4433 Thor Way Sacramento CA 95864

Address (Business Address Acceptable)

Check one

☐ Trust, go to 2 ☒ Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

Consulting

FAIR MARKET VALUE

- ☐ \$2,000 - \$10,000
☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000
☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:

____/____/09 ____/____/09
ACQUIRED DISPOSED

NATURE OF INVESTMENT

☒ Sole Proprietorship ☐ Partnership ☐ Other

YOUR BUSINESS POSITION **Owner**

► 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

- ☒ \$0 - \$499 ☐ \$10,001 - \$100,000
☐ \$500 - \$1,000 ☐ OVER \$100,000
☐ \$1,001 - \$10,000

► 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (attach a separate sheet if necessary)

► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST

Check one box:

☐ INVESTMENT ☐ REAL PROPERTY

Name of Business Entity or
Street Address or Assessor's Parcel Number of Real Property

Description of Business Activity or
City or Other Precise Location of Real Property

FAIR MARKET VALUE

- ☐ \$2,000 - \$10,000
☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000
☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:

____/____/09 ____/____/09
ACQUIRED DISPOSED

NATURE OF INTEREST

☐ Property Ownership/Deed of Trust ☐ Stock ☐ Partnership

☐ Leasehold ____ Yrs. remaining

☐ Other

☐ Check box if additional schedules reporting investments or real property are attached

Comments:

Verification

Print Name **Lucia Christina Becerra**

Office, Agency or Court **Department of Boating and Waterways**

Statement Type ☐ 2009/2010 Annual ☐ ____ Annual ☒ Assuming ☐ Leaving ☐ Candidate
(yr)

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed **5/10/10**
(month, day, year)

Signature